



**ACKNOWLEDGEMENT OF NOTIFICATION  
OF REGULATED WASTE ACTIVITY  
(VERIFICATION)**

This is to acknowledge that you have filed a Notification of Regulated Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Biennial Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

+ PAR000034488 05/12/98

INSTALLATION ADDRESS

AMOCO NO 60987 TANKS  
STE 900 1 W PENNSYLVANIA AVE  
TOWSON, MD 212045027  
TONI DOUGHERTY DISPATCHER

100 LINCOLN HWY  
FAIRLESS HILLS, PA 19030

completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



**EPA**

# Regulated Waste Activity

United States Environmental Protection Agency

(For Official Use Only)

**EPA REGION**

## I. Installation's EPA ID Number (Mark 'X' in the appropriate box)



A. First Notification



B. Subsequent Notification  
(complete Item C)

C. Installation's EPA ID Number

PAR000034488

## II. Name of Installation (Include company and specific site name)

AMOCO #60987 TANKS

## III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

100 LINCOLN HWY

Street (continued)

City or Town

FAIRLESS HILLS

State

ZIP Code

PA 19030 -

County Code

County Name

017 BUCKS

## IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

SUITE 900 1 W PENNSYLVANIA AV

City or Town

TOWSON

State

ZIP Code

MD 21204 - 502

## V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (last)

DOUGHERTY

(first)

TOMI

Job Title

DISPATCHER

Phone Number (area code and number)

410 - 494 - 3704

## VI. Installation Contact Address (See Instructions)

A. Contact Address  
Location Mailing



B. Street or P.O. Box

SUITE 900 1 W PENN AVE

City or Town

TOWSON

State

ZIP Code

MD 21204 - 502

## VII. Ownership (See Instructions)

### A. Name of Installation's Legal Owner

AMOCO OIL COMPANY

Street, P.O. Box, or Route Number

SUITE 900 1 W PENNSYLVANIA AVE

City or Town

TOWSON

State

ZIP Code

MD 21204 -

Phone Number (area code and number)

410 - 494 - 3706

B. Land Type



C. Owner Type



D. Change of Owner Indicator

Yes

No

(Date Changed)  
Month Day Year

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

A. Hazardous Waste Activity	B. Used Oil Fuel Activities
<p>1. Generator (See instructions)</p> <p><input type="checkbox"/> a. Greater than 1000kg/mo (2,200 lbs.)</p> <p><input checked="" type="checkbox"/> b. 100 to 1000 kg/mo (220 - 2,200 lbs.)</p> <p><input type="checkbox"/> c. Less than 100 kg/mo (220 lbs.)</p> <p>2. Transporter (Indicate Mode in boxes 1-5 below)</p> <p><input type="checkbox"/> a. For own waste only</p> <p><input type="checkbox"/> b. For commercial purposes:</p> <p style="margin-left: 20px;">Mode of Transportation</p> <p><input type="checkbox"/> 1. Air</p> <p><input type="checkbox"/> 2. Rail</p> <p><input type="checkbox"/> 3. Highway</p> <p><input type="checkbox"/> 4. Water</p> <p><input type="checkbox"/> 5. Other - specify <span style="border: 1px solid black; display: inline-block; width: 150px; height: 1.2em; vertical-align: middle;"></span></p>	<p>3. Treater, Storer, Disposer (at installation)</p> <p>Note: A permit is required for this activity; see instructions.</p> <p>4. Hazardous Waste Fuel</p> <p><input type="checkbox"/> a. Generator Marketing to Burner</p> <p><input type="checkbox"/> b. Other Marketers</p> <p><input type="checkbox"/> c. Burner - Indicate device(s) - Type of Combustion Device</p> <p><input type="checkbox"/> 1. Utility Boiler</p> <p><input type="checkbox"/> 2. Industrial Boiler</p> <p><input type="checkbox"/> 3. Industrial Furnace</p> <p><input type="checkbox"/> 5. Underground Injection Control</p>
	<p>1. Off-Specification Used Oil Fuel</p> <p><input type="checkbox"/> a. Generator Marketing to Burner</p> <p><input type="checkbox"/> b. Other Marketer</p> <p><input type="checkbox"/> c. Burner - Indicate device(s) - Type of Combustion Device</p> <p><input type="checkbox"/> 1. Utility Boiler</p> <p><input type="checkbox"/> 2. Industrial Boiler</p> <p><input type="checkbox"/> 3. Industrial Furnace</p> <p><input type="checkbox"/> 2. Specification Used Oil Fuel Market (or On-site Burner) Who First Claim the Oil Meets the Specification</p>

IX. Description of Regulated Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001)	2. Corrosive (D002)	3. Reactive (D003)	4. EP Toxic (D000)	(List specific EPA hazardous waste number(s) for the EP Toxic contaminant(s))
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em;"></span> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em;"></span> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em;"></span> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em;"></span>

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33. See instructions if you need to list more than 12 waste codes.)

1 <div style="border: 1px solid black; padding: 2px; display: inline-block;">D 0 1 8</div>	2 <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	3 <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	4 <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	5 <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	6 <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
7 <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	8 <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	9 <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	10 <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	11 <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	12 <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

C. Other Wastes. (State or other wastes requiring an I.D. number. See instructions.)

1 <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	2 <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	3 <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	4 <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	5 <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	6 <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
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X. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in and all attached documents, and that based on my inquiry of those individuals immediately responsible obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines imprisonment.

Signature <i>Toni Dougherty</i>	Name and Official Title (type or print) TONI DOUGHERTY DISPATCHER	Date Signed 4-23-98
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XI. Comments

BATH/MS 4/30/98  
USE 11

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)